

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 10, 1999 8:00 am**  
**Secretary of State**

03-10-1999 90033 023 \*\*\*150.00

DOCUMENT # P98000010328  
1. Corporation Name

Intertek Consultants, Corp.



Principal Place of Business

Mailing Address

12777 NW 18th Manor  
Pembroke Pines, FL 33028

Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

1/28/98

2. Principal Place of Business

2a. Mailing Address

12777 NW 18th Manor  
Suite, Apt. #, etc.

26 Same

Suite, Apt. #, etc.

4. FEI Number

65-0810082

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

City & State

Pembroke Pines, FL

City & State

28

Zip Country  
33028 25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Felipe McCausland  
12777 NW 18th Manor  
Pembroke Pines, FL 33028

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President ☒ DELETE  
NAME Edgardo Abello  
STREET ADDRESS 2151 NW 125th Terrace  
CITY-ST-ZIP Pembroke Pines, FL 33028

1.1 TITLE President ☒ Change ☐ Addition  
1.2 NAME Susan McCausland  
1.3 STREET ADDRESS 12777 NW 18th Manor  
1.4 CITY-ST-ZIP Pembroke Pines, FL 33028

TITLE Treasurer ☒ DELETE  
NAME Fabiola Abello  
STREET ADDRESS 2151 NW 125th Terrace  
CITY-ST-ZIP Pembroke Pines, FL 33028

2.1 TITLE Vice President ☒ Change ☐ Addition  
2.2 NAME Felipe McCausland  
2.3 STREET ADDRESS 12777 NW 18th Manor  
2.4 CITY-ST-ZIP Pembroke Pines, FL 33028

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-389-0434

CR2E034 (10/97)